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APPLICANTS

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** CONTINUING DATA ***** *None*
BR

** FOREIGN APPLICATIONS ***** *None*
BR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/20/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	<i>Aug 16</i> Examiner's Signature	<i>BR</i> Initials	FRANCE	12	19

ADDRESS

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TITLE

Dispenser with detachable retention feature

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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